

Retail Food Establishment Inspection Report

Floyd County Health Department Telephone:812-948-4726

Based on an inspection this day, the item(s) noted below identify violation of 410 IAC 7-24, Indiana Retail Food Establishment Sanitation Requirements. The time limit for correction of each violation is specified in the narrative portion of this report.

Establishment Name				Telephone Number	Date of In	spection PERMIT #
Taco Bell				812-748-2248	(mm/dd/yi	r)
Establishment Address (number and street, city, state, zip code)					6-3	19-
1000 Daisy Summit DI. New Albany, IN 47158						307
Owner / / / / / /				Purpose:	Follow-u	p Release Date
C.M. Smith Roslaurant, incl clinton Smith				1. Routine	NO	10 days
Owner's Address				2. Follow-up	Summary	of Violations;
				3. Complaint		
Person in Charge Rebekah Gilpin				4. Pre-Operational	c <u>0</u>	NC_{1} R_{2}
Responsible Person's E-mail				5. Temporary	Menu Tyj	pe (See back of page)
				6. HACCP		
Certified Food Manager Rese Kah Gilpin (3-6-19) 7. Other (list)					12	<u>V</u> 3 4 5
• CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"						
• VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRATIVE BELOW AS "R"						
Section#	C/NC	R	Narrative			To Be Corrected By
324	NC		Observed clean-out behind &	For building		1 week
		ļ	damaged and in need of replace			
	<u>-</u>		Observed drain line From		^	1 week
<u> </u>				drink maenin	1 C	1 WEEK
·			in lobby leaking.	<u> </u>		
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Received by (name and title printed): Inspected by (name and title printed):						
Rebellah Gilain GM Thomas Suider, EHS						
Received by	(signature);		Inspected by (signature):	, 	
Helpelell - Storm Smith						
cc;	كيلانك	<u> </u>	cc:		ce:	